


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 14, 2005 08:00 AM
Secretary of State

DOCUMENT # 856259
1. Entity Name
VINEYARD BRANDS, INC.



Principal Place of Business Mailing Address
2000 RESOURCE DRIVE 2000 RESOURCE DRIVE
BIRMINGHAM, AL 35242 US BIRMINGHAM, AL 35242 US

DO NOT WRITE IN THIS SPACE



02252005 No Chg-P CR2E034 (10/03)

4. FEI Number 94-2217504	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
PERKINS, GREGG
3515 RIVERSIDE AVE
JACKSONVILLE, FL 32205

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Gregg Perkins 2/24/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000263865 03/14/05-80103-021 158.75
---	--	---

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FABRE, HUBERT 78 ARBOLEDA LANE CARMEL VALLEY, CA 93924
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPS CASSAVOY, ROBERT 2328 RIDGE TRAIL BIRMINGHAM, AL 35242
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARSHALL, CHRIS 70 SPRING STREET WRENTHAM, MA 02093
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HAAS, DANIEL E. 1243 'C' STREET SE WASHINGTON, DC
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NEFF, JERRY L. 3883 LOCKERBIE DR BIRMINGHAM, AL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PETROW, JAN 13 ORCHARD KATONAH, NY 10536

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert S. Cassavoy Robert S. Cassavoy 2/24/05 (205)980-8802
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #